

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b).)

Attorney Docket No. SD-8488
First Inventor or Application Identifier CARDINALE
Title PROGRAMMABLE IMPRINT LITHOGRAPHY TEMPLATE
Express Mail Label No. EL177882083US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ *Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and duplicate for fee processing)
2. ☒ Specification [Total Pages **13**]
(preferred arrangement set forth below)
 - Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to Microfiche Appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
3. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets **6**]
4. ☐ Oath or Declaration [Total Pages ☐]
 - a. ☐ Newly executed (original or copy)
 - b. ☐ Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 16 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

***NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).**

ADDRESS TO: MS Patent Application
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

5. ☐ Microfiche Computer Program (Appendix)
6. ☐ Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. ☐ Computer Readable Copy
 - b. ☐ Paper Copy (identical to computer copy)
 - c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. ☐ Assignment Papers (cover sheet & document(s))
8. ☐ 37 C.F.R. § 3.73(b) Statement
(when there is an assignee)
9. ☐ English Translation Document (if applicable) ☐ Power of Attorney
10. ☐ Information Disclosure Statement (IDS)/PTO-1449
11. ☐ Preliminary Amendment ☐ Copies of IDS Citations
12. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
13. ☐ *Small Entity Statement(s) ☐ Statement filed in prior application, Status still proper and desired (PTO/SB/09/12)
14. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
15. ☐ Other: _____

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

- ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____/_____
Prior application information: Examiner _____ Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label **Customer #** _____ or ☐ Correspondence address below
(Insert Customer No. or Attach bar code label here)

Name	Timothy P. Evans				
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	7011 East Av nue,				
City	Liv rmore,	State	CA	Zip Code	94550
Country	USA	Telephone	((25) 294-3690	Fax	(925) 294-3389
Name (Print/Type)	Timothy P. Evans		Registration No. (Attorney/Agent)		44,013
Signature			Date		1/13/2004

Burden Hour Statement: This form is estimated to take 1/2 hour to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FILES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">FOR FY 2004</h2> <p style="font-size: small; margin: 5px 0;">Patent fees are subject to annual revision. Small Entity payments <u>must</u> be supported by a small entity statement, Otherwise large entity fees must be paid. See Forms PTO/SB/09-12.</p>		Complete if Known	
		Application Number	NOT ASSIGNED
		Filing Date	January 13, 2004
		First Named Inventor	Cardinale
		Examiner Name	NOT ASSIGNED
Group / Art Unit		NOT ASSIGNED	
TOTAL AMOUNT OF PAYMENT (\$770.00)		Attorney Docket No. SD-8488	

<h3 style="margin: 0;">METHOD OF PAYMENT (check one)</h3> <p>The Commissioner is hereby authorized to charge</p> <p>1. <input checked="" type="checkbox"/> Indicated fees and credit any over payments to:</p> <p>Deposit Account Number 50-0583</p> <p>Deposit Account Name SNL BY KCO</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p>2. Payment Enclosed:</p> <p><input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>	<h3 style="margin: 0;">FEE CALCULATION (continued)</h3> <h4 style="margin: 5px 0;">3. 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